

MDR Tracking Number: M2-03-1524-01
IRO Certificate# 5259

August 1, 2003

An independent review of the above-referenced case has been completed by a medical physician [board certified] in physical medicine and rehabilitation. The appropriateness of setting and medical necessity of proposed or rendered services is determined by the application of medical screening criteria published by ____, or by the application of medical screening criteria and protocols formally established by practicing physicians. All available clinical information, the medical necessity guidelines and the special circumstances of said case was considered in making the determination.

The independent review determination and reasons for the determination, including the clinical basis for the determination, is as follows:

See Attached Physician Determination

____ hereby certifies that the reviewing physician is on Texas Workers' Compensation Commission Approved Doctor List (ADL). Additionally, said physician has certified that no known conflicts of interest exist between him and any of the treating physicians or providers or any of the physicians or providers who reviewed the case for determination prior to referral to ____.

CLINICAL HISTORY

This is a gentleman who sustained an injury on _____. One year later on _____ a cervical MRI was completed and no disc lesion was identified. Nine years later, on _____ there was an assessment by _____ noting radicular findings and neurological deficits. In follow-up there was a progressive weakness. Discogram was completed on April 16, 2003. C3/4, 4/5, 5/6, and 6/7 were reported as positive studies with annular tears. Transforminal blocks were completed. The request for MRI was denied due to the discogram documenting the multiple level disc pathology and that this study would not aid the diagnosis or treatment plan.

REQUESTED SERVICE (S)

Repeat cervical MRI.

DECISION

Deny the request.

RATIONALE/BASIS FOR DECISION

As noted in the statute (408.021) the employee is entitled to healthcare that relieves the effects resulting from the compensable injury. However, there are no medical records presented that identify that the injury caused any disc lesions.

The MRI completed one year after the compensable event noted no disc lesion. The discogram made nine years after noted multiple level findings consistent with a degenerative process. There is insufficient documentation presented that support that this current finding is naturally resulting from the compensable injury. The notation of increasing changes makes this clinically indicated, but nine years after the compensable event with a normal MRI noting no pathology after the event, this is not required by the nature of the injury.

YOUR RIGHT TO REQUEST A HEARING

Either party to this medical dispute may disagree with all or part of the decision and has a right to request a hearing.

If disputing a spinal surgery prospective decision a request for a hearing must be in writing, and it must be received by the TWCC Chief Clerk of Proceedings within **10** (ten) calendar days of your receipt of this decision (20 Tex. Admin. Code 142.5©)

If disputing other prospective medical necessity (preauthorization) decisions a request for a hearing must be in writing, and it must be received by the TWCC Chief Clerk of Proceedings within **20** (twenty) calendar days of your receipt of this decision (28 Tex. Admin. Code 148.3)

This decision is deemed received by you 5 (five) days after it was mailed or the date of fax (28 Tex. Admin. Code 102.4(h) or 102.5(d)). A request for a hearing and a **copy of this decision** must be sent to:

Chief Clerk of Proceedings/Appeals Clerk
Texas Workers' Compensation Commission
P.O. Box 17787
Austin, Texas 78744

Or fax the request to (512) 804-4011. A copy of this decision must be attached to the request.

The party appealing the decision shall deliver a copy of its written request for a hearing to the opposing party involved in the dispute.

In accordance with Commission Rule 102.4(h), I hereby verify that a copy of this Independent Review Organization (IRO) Decision was sent to the carrier, the requestor and claimant via facsimile or U.S. Postal Service from the office of the IRO on this 4th day of August 2003.